Emerge Cy Drought Action





APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with Ecology or with County Conservancy Boards

A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

(Check all that apply.) ☐ Change purpose(s) of use ☐ Add purpose(s) of use ☑ Change point(s) of diversion/withdrawal ☑ Add point(s) of diversion/withdrawal ☑ Change/transfer place of use ☐ Other (i.e. consolidation, intertie, trust water) Explain:	F	CHANGE No. CS4-2650 CHECK No. 00960 CHECK No. 00960 CHECK No. 00960	03,0/ BY 03,
**IF MORE SPACE IS NEEDED, ATTACH ADDI 1. Applicant Information:	IIIONAL SHE	EETS (PLEASE PRINT OR	TYPE CLEARLY)
APPLICANT/BUSINESS NAME		PHONE NO.	FAX NO.
Zaser & Longston, Inc., dba Keystone Frui	t L.L.C.	(425) 562-7997	(425) 562-4785
ADDRESS 1802 126th Place N.E.			
Bellevue		STATE Washington	ZIP8603E
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.
		, ,	/ \
Greg D. Zaser ADDRESS		() Same	() Same
Same as above			
CITY		STATE	ZIP CODE
2. Water Right Information:			
WATER RIGHT OR CLAIM NUMBER	RECORDED		77
S4-26567P	Zaser &	Longston, Inc., dl	a Keystone Ranch
DO YOU OWN THE RIGHT TO BE CHANGED? ☑ YES ☐ NO IF NO, PROVIDE OWNER(S) NAME:			
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST F	IVE (5) YEARS	? ⊠ YES □ NO	
Please attach copies of any documentation that dem was established. Also, if you have a water system p application.			
FOR OFFIC	CE USE ON	LY	
APP. NO PERMIT NO CER	RT. NO	CERT. OF CHAN	IGE NO
70			

C34-26567@2

3. Point(s) of Diversion/Withdrawal:

A. Existing

PARCEL# WELL TAG
Gov't Lot 2

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Okanogan River				7	35 N.	27 E.	Gov't Lot 3 &-4	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: ☑ YES ☐ NO

PROPOSED: ☐ YES ☐ NO – IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Crop Irrigation & Frost Control	6	230	April 1 through Sept. 30

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Crop Irrigation Only	Irrigatio	n Poriton	April 1 through Sept 30

5. Place of Use:

A. Existing

		LE	GAL DESCR	RIPTION OF LAN	IDS WHERE WATER IS PR	ESENTLY USED:	
Gov't I	Lot 2 Se	ec. 32;	and SW4N	₩¼, Gov't	Lot 1 and NW4SW48	SW¼ (being a port:	ion of Gov't
						County, Washingto	
Trrical	don Di	-1-4- G-1-			11 to 1 - to		hashad lass1
IIIIga	TOU KI	gnts ont	y to por	tions of t	the above to be t.	ranferred, see att	cached regar
1/4 /4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
		T	1				

			LEGAL DES	CRIPTION OF I	LANDS WHERE NEW USE I	S PROPOSED:	
As muc	h as 35	acres w	ithin th	ne SE½SE½	AND that part of	the SW4SE4 lying e	easterly of
						LESS road. Actus	
.ne co	uncy 10.	au, ALL	III Sec.	12, 1. 33	N., K. 20 E.W.FI.,	EEDS TORG.	
	10.000						
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

YES NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

6. Remarks and Other Relevant Inf			
S4-26567P is for BOTH "Irrigation	" AND "Frost Control	.". It is only	the "Irrigation"
portion of this permit which is b	eing tranferred.		
FOR SEASONAL OR TEMPORARY, START DATE _	4 / 23 / 01 END DATE	9 / 30/ 01	
7. Signatures:			
I certify that the information above is	true and accurate to the	hest of my knowle	doe Lunderstand the

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me.

(Applicant)

(Applicant)

(Date)

4 130 101

(Date)

(Water Right Holder)

(Date)

(Date)

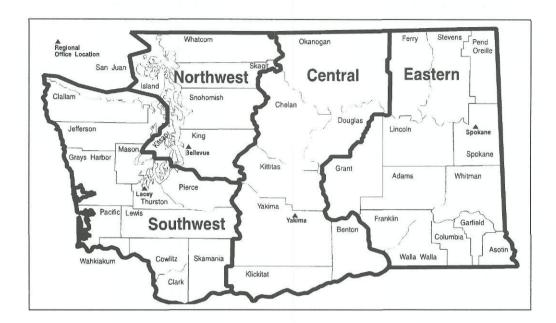
(Date)

IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE.

WE ARE RETURNING YOUR APPLICATION	N FOR THE FOLLOWING REASON(S):
☐ APPLICATION FEE NOT ENCLOSED	☐ MAP NOT INCLUDED or INCOMPLETE
☐ ADDITIONAL SIGNATURES REQUIRED	□ SECTIONIS INCOMPLETE
OTHER/EXPLANATION:	
STAFF:	DATE:/

IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology Central Regional Office 15 W. Yakima Avenue, Suite 200 Yakima, WA 98902 Telephone: (509) 575-2490

Department of Ecology Northwest Regional Office 3190 – 160th Avenue SE Bellevue, WA 98008-5452 Telephone: (425) 649-7000 Department of Ecology Eastern Regional Office N. 4601 Monroe, Suite 202 Spokane, WA 99205-1295 Telephone: (509) 456-2926

Department of Ecology Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 Telephone: (360) 407-6300

Persons of disability needing assistance in the application process or those needing this application in an alternate format, may call (360) 407-6607 (voice) or (360) 407-6006 (TDD).

Ecology is an Equal Opportunity and Affirmative Action employer...